

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/344,299	06/24/99	381	2743	1538/20

APPLICANT

STEPHEN R. SCHWARTZ, PROVIDENCE, RI; JOHN H. OSMAND, PROVIDENCE, RI;
DAMIAN KULASH, CHICAGO, IL.

****CONTINUING DOMESTIC DATA*******

VERIFIED

None ^{BTP}

****371 (NAT'L STAGE) DATA*******

VERIFIED

None ^{BTP}

****FOREIGN APPLICATIONS*******

VERIFIED

None ^{BTP}

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 07/20/99 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	B.T.P. <u>2-3-2</u> Examiner's Initials Initials	RI	8	35	10

ADDRESS

SHAWN W O'DOWD
KENYON & KENYON
333 W SAN CARLOS STREET
SUITE 600
SAN JOSE CA 95110

TITLE

COMPLEMENTARY-PAIR EQUALIZER

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
\$853		